

## REQUEST FOR RELEASE FROM MANDATORY ASSIGNMENT TO MILITARY FAMILY HOUSING TO RECEIVE BAH

**Section I:** Please fill in **all data** requested completely. Failure to do so will delay the processing of your request. The Alameda Local Housing Officer will only consider requests that have been completely filled out and approved. Only the member, unless the spouse has the appropriate power of attorney, may fill out this request.

Service Member's Name ( <i>last, first, MI</i> ):	Command:	Phone Number	Rank (Novato only)
Current Military Family Housing (MFH) Address	Size of Unit (2,3,4 bedroom)		

### Section II

I, the undersigned, understand I am requesting permission for a release from mandatory assignment to Military Family Housing (MFH). I also understand the conditions set forth below.

Please initial next to each line.

(     ) I understand by electing to receive my BAH I may not be able to return to government quarters for the remainder of my current tour.

(     ) I understand by receiving BAH I am prohibited from residing overnight in any government quarters, including on any ship, while in homeport unless required to do so (such as in port duty days or underway periods).

(     ) I understand if at some point I am approved to receive BAH and reside on the economy, I will be notified by e-mail. I understand it is my obligation to keep the Housing Office informed of my whereabouts if I am not at my duty station for any extended period of time (more than 2 days). I understand that failing to do this could result in the approval to receive BAH being rescinded. I also understand if I accept the offer to receive BAH and vacate MFH, I am obligated to do so and cannot change my mind and remain in MFH.

(     ) I understand if I am approved to receive BAH and reside on the economy, I am required to submit an Intent To Vacate Form with the Housing Office at least 30 days prior to my departure. I also understand my BAH will not start until I have successfully cleared my MFH unit. I further understand I am not entitled to Dislocation Allowance (DLA) or a government funded household goods move.

Service Member's Signature	Date Submitted
Local Housing Representative's Signature	Date Received

### Section III: Alameda Local Housing Officer Decision.

The following determination has been made regarding the above request.

<input type="checkbox"/> Approved (LHO initials)	<input type="checkbox"/> Disapproved (LHO initials)
	Added to BAH Wait List on _____
Local Housing Officer's Signature:	Date: